# FOR INSTRUCTIONS, SEE BACK OF FORM

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

IA ETHICS AND DISCLOSURE SUMMARY PAGE Effective January 1, 2010, all statements and reports filed by new committees PAIGH DISCLOSURE 8

for state office must be filed electronically and effective January 1, 2012, all for state office must be filed by all committees for state office must be file 2010 MAY 18 AM 7: 30

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically. Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) FORM Committee to Elect Greg Forristall DR-2 DISCLOSURE REPORT (Rev. 12/2009) IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Inc. (11) Inc. (12) Inc. (13) Inc. (13) Inc. (14) Inc. (15) Inc. (16) Inc For Office Use Only Comm. # 11 ) Local Ballot Issue Logged In S CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Candidate Name Republican Computer Greg Forristall Audited District (if Senate or House) Office Sought Representative Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 5-17-2010 SIGNATUBÉ OF PERSON FILING REPORT REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. I AM FILING A May 19, 2010 Indicate by # | 1 | (report date) Local Committees, enter Date of Election ☐CHECK IF AMENDMENT TO REPORT DATED ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in which Election is held (You must continue to file reports until a DR-3 is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 1,996.20 of the last reporting period or must be zero if this is first report filed.) ......\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD 3,040.00 Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 5,036.20 SUB-TOTAL.....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD 1,716.94 Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)..... Schedule F: Loan Repayments total (Attach Schedule F)..... 3,319.26 \*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ 0.00 \*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ......\$ 0.00YES \_ NO CONSULTANT BREAKDOWN (Schedule G Attached?) 0.00 CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

Reset Form

## For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Greg Forristall

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
1	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	FFOR FUND- RAISER INCOME
)1/07/2010	ID# <sub>6082</sub> CK# <sub>1522</sub>	MidAmerican Energy Co. Effective Gov. Com. 666 Grand Ave P.O. Box 657		\$200	
02/26/2010	ID# CK# 5421	Gerald Forristall 205 Maple Drive Trevnor, IA 51575	Father	100	
02/26/2010	ID# CK# 7792	Herb Sudmann 28106 Highway 92 Treynor, IA 51575		20	
02/26/2010	ID# CK# 8463	Grant Dean 56082 22nd St Glenwood, IA 51534		100	
02/26/2010	ID# CK# <sub>13473</sub>	Larry Wimum 56250 221st St. Glenwood, IA 51534-6301		100	
02/26/2010	CK# <sub>2075</sub>	Susan Goos 610 Hamilton Macedonia, IA 51549		25	
02/26/2010	ID# CK# <sub>6826</sub>	Craig Sudmann 29007 Highway 92 Treynor, IA 51575		20	
02/26/2010	CK# <sub>5660</sub>	Keith Denton 13806 300th St. Treynor, IA 51575		25	
02/26/2010	ID# CK# 17795	James R. Knott 300 W. Broadway Ste 30 Council Bluffs, IA 51503		250	
02/26/2010	ID# CK# 1715	Jack Fox 447 Washington St. Carson, IA 51525		150	
			SUB-TOTAL	<b>\$</b> 990	
		TOTAL (if last	page of this schedule)	\$	l

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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Greg

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)  Committee to Elect Gree Forristall		Control of the last of the las	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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02/26/2010	ID# CK# <sub>5803</sub>	Dennis Hein 14216 Franklin St. Omaha, NE 68154	Brother-in-law	\$500	
02/26/2010	ID# CK# <sub>4630</sub>	Jean Goos PO Box 266 Treynor, IA 51575	Mother-in-law	100	
02/26/2010	CK# <sub>4439</sub>	Marlyn Von Weihe 42737 Cottonwood Rd. Carson, IA 51525		50	
02/26/2010	ID# CK# 1491	Philip Meyer 341 Woodland Dr. Council Bluffs, IA 51503		100	
02/26/2010	CK# <sub>3718</sub>	Lowell Forristall 13418 425th St Carson, IA 51525	Cousin	50	
02/26/2010	CK# 3302	Bill Ballenger 240 Locust Lodge Ave. Council Bluffs, IA 51503		50	
02/26/2010	CK# <sub>6461</sub>	Gary Forristall 35252 Pioncer Trail Macedonia, IA 51549	Brother	100	
02/27/2010	CK# <sub>11358</sub>	Bill and Ann Vorthmann 29219 Beechnot Rd. Treynor, IA 51575		100	
03/04/2010	ID# CK# 9865	Dr. Charles Pigneri 416 Kelsay Ave. Oakland, IA 51560		50	
03/04/2010	ID# CK# 2199	Craig Korkow 27361 Pioneer Trail Silver City, IA 51571		50	
			SUB-TOTAL	\$ 1150	
		TOTAL (if last pa	age of this schedule)		1

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For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF
Committee to Floot Grea Fornistall			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF 1D NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
03/04/2010	ID# CK# <sub>7864</sub>	Mick and Judy Guttau 31107 Dogwood Rd. Treynor, IA 51575		\$100	
03/04/2010	ID# CK# 8373	Scott Doll 77 Pelican Cove Council Bluffs, IA 51501		100	
03/06/2010	ID# CK# 4628	Bruce and Ruby Bentley 38038 Aspen Rd. Macedonia, IA 51549		100	
03/12/2010	ID# CK# 5285	Maurcen Olsen P.O. Box 7 Neola, IA 51559		50	
03/27/2010	CK# <sub>10600</sub>	Nancy Schulze 12800 240th St Council Bluffs, IA 51503		50	
04/14/2010	ID# CK# 2191	Jennifer Hein-Nore 1919 Otoe St. Lincoln, NE 68502	Niece	100	
04/16/2010	ID# CK# <sub>8122</sub>	Richard Crouch 59629 280th St. Malvern, IA 51551		100	
05/14/2010	ID# CK# <sub>5320</sub>	Dr. David Jones 15252 Bloomfield Lane Council Bluffs, IA 51503		200	
05/14/2010	1D# CK# 2368	Iowa Dental Association PAC 5530 West Parkway Ste 100 Johnston, IA 50131		100	
	ID# CK#				
		<u> </u>	SUB-TOTAL	<b>\$</b> 900	

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3040

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset	Form	

### EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES; NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Greg Forristall

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01/13/2010	D#   CK#1055	Postmaster Macedonia, IA 51549	100 Postage stamps	\$ 44.00
03/04/2010	ID# CK# 1056	House Majority Fund 621 E. 9th Des Moines, IA 50309	Contribution	850
03/04/2010	ID# CK# 1057	House Majority Fund 621 E. 9th Des Moines, IA 50309	Contribution	600
03/08/2010	ID# CK#1058	House Postmaster State Capital	100 Postage stamps	44
04/01/2010	ID# CK# <sub>1059</sub>	Carol Forristall 11917 370th St Macedonia IA.	Reimbursement for Campaign Mailing: Stamps, Paper, Printer cartridges, Envelopes, Receipts	178.94
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTA	L \$ 1716.94

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THIS BO	X APPL	JES TO	CANDIDATES	COMMITTE	ES ONLY:

Purchases of certain campaign properly costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail iterrized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of		_

\$ 1716.94

TOTAL (if last page of this schedule)